

The Constant Gardener or the development of new Therapies

Juan Luis Cuesta Jiménez

Facultad de Medicina. Universidad de Salamanca (Spain).

Correspondence: Juan Luis Cuesta Jiménez. Facultad de Medicina. Universidad Salamanca. 37007 Salamanca (Spain).

e-mail: jlcuesta@yahoo.es

Received 29 May 2006; accepted 27 June 2006

Summary

The film is an adaptation of John Le Carré's homonymous novel (2001), directed by Fernando Meirelles. It is a particular vision about the medical practice in the so-called Third World countries. There are also some references to the treatment of AIDS and to the studies being undertaken for new treatments of illnesses such as tuberculosis. There is also a critical vision concerning the ethics of the experiments the pharmaceutical firms are undertaking to test the new drugs.

Keywords: Sanitary Education, Clinical Trials, Ethics, Multiresistant *Mycobacterium tuberculosis*, AIDS, John Le Carré, Cinematographic Adaptation.

Technical details**Original Title:** *The constant gardener***Country:** Germany and UK**Year:** 2005**Director:** Fernando Meirelles**Music:** Alberto Iglesias**Screenwriter:** Jeffrey Caine's adaptation of the homonymous novel by John Le Carré.**Cast:** Ralph Fiennes, Rachel Weisz, Hubert Koundé, Danny Huston, Daniele Harford, Packson Ngugi, Damaris Itenyo Agweyu, Bernard Otieno Oduor, Bill Nighy, Keith Pearson, John Sibi-Okumu, Donald Sumpter, Archie Panjabi, Nick Reding, Gerard McSorley and Pete Postlethwaite.**Color:** Color**Runtime:** 129 minutes**Genre:** Drama, thriller**Production Companies:** Potboiler Productions, Epsilon Motion Pictures, Scion Films Limited, UK Film Council**Synopsis:** Justin Quayle is a British diplomat in a remote village in Northern Kenya. His happy marriage with Tessa, a committed political activist in the zone, but it abruptly comes to an end when she is brutally murdered along with the local physician. According to the British High Commission who tries to make sense of the crime, the evidence indicates it was a crime of passion. Justin, however,

dismisses this assumption as he has some serious reservations about this issue and nothing will prevent him from uncovering the truth about the murder of his wife.

Awards and nominations: Rachel Weisz, awarded the Oscar prize for the best supporting actress (2005). Oscar nominations for Oscar for Best Writing, Screenplay Based on Material Previously Produced or Published, Best Achievement in Music Written for Motion Pictures, Original Score and Best Achievement in Editing

The Constant Gardener (2005) is the sixth film by the Brazilian Fernando Meirelles. He calls upon the critical situation in which the African continent is currently living. But it is also a reminder of how many people die due to the drug markets that are now being controlled by certain mafias. Meanwhile, the Western world silently tolerates this situation. Although his film *God's Town / Cidade de Deus* (2002) scored an Oscar nomination for best director in 2003, the present film has shown its utter dominance this awards season. The film is, in fact, his most laureate work. Rachel Weisz in the role of Tessa Quayle (figure 1) was awarded the Oscar for the best supporting actress (2005). The film also received Oscar award nominations in three other modalities, namely for the best original soundtrack, written by the Spanish composer Alberto Iglesias; for the best adapted screenplay, written by

Jeffrey Caine, and for the best editing, by Claire Simpson. It should also be mentioned that while Caine was writing the script - it took him about two years to finish it - he was able to rely on the assistance of the author of the novel who supervised all the changes that had been introduced in the film. Ralph Fiennes and Rachel Weisz had already worked together in the film *Sunshine* (1999) by Istvan Szabo.

The film

The film opens with the murder of one of the major characters. Tessa Quayle is discovered brutally murdered in a remote area in Northern Kenya. Her widower, Justin, is a mild-mannered and timid British diplomat. Her death, however, will be the catalyst for Justin’s transformation to a man of action, full of the same strength and courage that Tessa was endowed with. The story, like the novel itself, moves in a nonlinear way and jumps back and forth through time around the narrative while telling the two parallel stories of this film. Working in flashbacks, he tells the whole story almost instantly, and within the first couple of scenes we know about the death of Tessa, the political activist and loving wife of the British diplomat.

Tessa is an outspoken political activist and loudly denounces her critical opinions about the impoverished conditions of the underdeveloped countries in their first encounter when she was attending a dull lecture by Quayle. Although Tessa stands up to ask Justin some biting and critical questions, they both fall in love in spite of being on opposite sides in terms of their political ideas. Before we know it the two marry and Tessa decides to accompany Justin on his posting as British diplomat to Africa (figure 2).



Figure 1: Tessa Quayle

Their life in Kenya in a poor African village appears to be full of happiness and it only gets better when they discover that Tessa is pregnant. Kenyan villagers are always dancing and singing, and the young activist feels integrated and happy in their companionship (figure 3). This, however, does not interfere with her will to fight against the injustices and burdens they have to suffer. But the mere presence of conviction may not be enough to change their minds. Together with the Kenyan physician, Arnold Bluhm (Hubert Koundé) (figure 4), they discover the poor practices of the international pharmaceutical firm KDH and its local subsidiary “Three Bees”. KDH is a pharmaceutical company that has created Dypraxa, a fairly new drug aimed for the treatment of multiresistant tuberculosis that has gone through the established controls. “Three Bees”, its local subsidiary in Kenya and the most profitable enterprise of the country, is now testing the new drug on poor African villagers at no cost for themselves. However, if they refuse to submit themselves to the experiments to test the new drug, they will be denied any medical assistance whatsoever.



Figure 2: Justin and Tessa fall in love just after knowing each other

Justin, on the other hand, is haunted by the suspicions of Tessa’s infidelity as he suspects her relationship with Arnold is more than the typical doctor-patient relationship. As he becomes aware of his pent-up fears he comes to believe that his wife no longer loves him. However, he does not want to lose her, so he remains silent and goes back to tend his flower garden.

The couple experiences an unfortunate turn when Tessa loses the baby she was expecting. At the hospital they happen to meet a 15-year old girl who is now under treatment with Dypraxa. As Tessa becomes aware of how damaging this treatment may become, she decides to start a crusade against the major pharmaceutical companies. Therefore, she pieces

together all the information she has at her disposal and writes a report to the British High Commission for its evaluation. According to her, nowhere has the pharmaceutical firm made more costly mistakes. The British government, however, is colluded with these companies and the answer Tessa receives is not quite the one she was expecting. On a trip to the small town of Lokichongio she is brutally murdered.



Figure 3: Tessa, integrated into the keniata society, receives a present



Figure 4: Tessa and Arnold Bluhm, the local doctor

It is telling that the British High Commission wants to downgrade the problem as they want to let the matter quietly disappear. They issue a report according to which evidence shows that her murder might be a crime of passion. Justin begins to suspect that her death was no accident when he realizes that the local police had confiscated all of her documents. After the funeral, Justin decides to investigate her death, allowing nothing to stand in his way until he finds out who killed his wife (figure 5). He goes to the village where the girl from the hospital was supposed to live; however, he is unable to find her. He, nevertheless, discovers the truth about the medical health care and the malpractices of the pharmaceutical firm in this African country.

His only will now is to continue with what



Figure 5: Tessa's burial

mattered to her, with what she was committed to and to uncover those who killed her (figure 6). The British High Commission does not want Justin to dig below the surface, and against the strong wish of his superiors to leave the matter to them, he will risk his own life in order to investigate and expose the truth about Dypraxa. Although they attempt to force him to return to England, all efforts to retain him there will be useless. He already found some clues in Tessa's laptop but he needs to gather more information about this issue. Provided with a new identity and a fake passport he travels to different countries where he can find more clues relating to this dilemma. It is assumed that the drug would only be marketed if the current experiments that are testing the drug in Kenya would show no potentially dangerous adverse effects. Justin, however, will question the validity of the clinical tests when he discovers that the British High Commission, in collusion with KDH and "Three Bees", are eliminating all those results that do not fit with the expected values. He then journeys to Sudan (figure 7) where he hopes to find the actual test results. He can therefore confirm what he already knew: Tessa was murdered because she wanted the



Figure 6: Justin decided to find over the reasons of his wife's death

experiments to test Dypraxa to be stopped and for the company to redesign the drug. This, however, would have been an enormous drawback for the pharmaceutical firm because it would imply a delay in the market introduction of the drug and hence a huge loss of money. Although the drug may have some healing properties, it can also have fatal consequences. But the cost of re-developing such drug to be marketed worldwide, with no mortal effects anymore, is usually put at millions of dollars. In addition, they cannot afford losing money, so they counterfeit the existing data by dismissing all data concerning patients which presented adverse side effects.



Figure 7: Justin arrives in Sudan

The film ends as it begins. Once finished with the investigation, Justin sends the information containing tangible evidence of the conspiracy that stirs up great commotion in England. Back from Sudan where he almost loses his life, he decides to stop at the lake Tukana (figure 9). Aware of the risk it entails, his life comes to an end at the same site where his wife was murdered (figure 10). The constant gardener was loyal to her to his death.



Figure 8: Justin trying to save his life leaving Sudan

Sanitary education

Sanitary education pursues that individuals, groups, or collectives acquire knowledges, attitudes and conducts aimed at positively modifying people's behaviour. It can take place in schools, communities, education of patients or by means of national or central programs. The film shows how indirect methods were used for this purpose. The basic information about AIDS, its consequences, severity, and the importance of voluntary testing for HIV infection is delivered by means of its representation on stage. The information is thus accessible to a wide range of the population at a lower cost. This method positively sharpens healthy conducts. However, when compared with the direct methods direct contact between the educator and the pupils exists, the indirect methods have the disadvantage of the absence of feedback and a backward flow of information. Its efficacy is therefore reduced.



Figure 9: Justin traveling to lake Tukana

AIDS and tuberculosis in the film

Both diseases have the highest prevalence among the Kenyan population and the detection of both disturbances is accomplished by joint diagnostic tests. Therefore Kenya was chosen by the pharmaceutical firm to be the selected country to test the new drug against multiresistant tuberculosis.

All throughout the film we see how patients undergo treatment against tuberculosis with tablets of Dypraxa. No other drugs against tuberculosis are being mentioned, as the drug is supplied for free all over the country and dominating the domestic market. The film also shows some cases of AIDS. Such is the case of a HIV-infected breastfeeding woman who is treated with

tablets of Nevirapine, a drug that belongs to the non-nucleoside reverse transcriptase inhibitors (NNRTI) class of antiretrovirals (Nevirapine passes into human breast milk). In this case nevirapine may prevent mother-to-child transmission during breastfeeding. However, if this antiretroviral is administered by itself as a so-called monotherapy, HIV rapidly develops resistance. Therefore the recommended therapy consists of combination of three or more nucleoside analogues with a proven synergical or additive action¹. The use of this drug is mentioned in the film but it remains unknown whether it is used alone or combined with other antiretrovirals.

The film harshly criticizes the dishonesty of the suppliers of the nevirapine as it was supposed to be delivered at no cost for the patients. In serving their own ends they were not serving public as they deprived patients of their drugs but kept the money.

The film also stresses the importance of preventative measures. And some intentions to screen the population who is at highest risk to acquire the disease can also be seen on the film. Such is the case of the husband of the pregnant woman who seems to be reluctant to undergo the screening tests.

Clinical assays. Ethical aspects

Ethics is a scientific discipline dealing with what is good and bad and involves moral duty and obligations in human behaviour. On analysing the ethical conduct of those implied in this conspiracy about the new drug under development one can see how they affect things in favour of their own interests as they do not hesitate to load the dice beforehand and hide away all the negative results of the tests being practised. Both entities, the producer of KDH and “Three Bees”, who is responsible for the tests being performed, are not independent from each other as it should be. They flagrantly violate the ethical aspects of this procedure when they not only pursue common benefits but also do not correctly follow the actuation protocol previously established for these clinical assays².

When performing any test involving persons, several basic conditions need to be fulfilled: informed consent as well as privacy, confidentiality and preserved anonymity of the obtained data. When considering the informed consent, the process by which it is obtained is crucial. In this process two notions are important. First, the persons who agree to take part in these trials must clearly understand the

information they are being supplied with. Secondly, they may leave the process whenever they want to and no pressure to continue should be exerted on them by the organizers². In this film, however, patients were treated like guinea pigs - no information concerning the beneficial or adverse drug effects Dyprexa might produce was supplied to them. They also do not have the choice to reject the treatment, as their denial to take part in this clinical trials would imply that no further medical assistance would be supplied to them. This can be seen in their own sanitary card, where next to the initials I.C. there is a block that has to be filled in with a cross when the patient has been given all the necessary information for the informed consent. In other words, none of them received any information.



Figure 10: Justin and Tessa,s final encounter

The researchers (the pharmaceutical firms) have to conduct the clinical trials in accordance with good clinical practice. Therefore it is mandatory to publish all the obtained results of the clinical trials³. In the film, however, they do not publish the obtained results. They purposely supply biased data about the results of the clinical trials as they intend to hide away its most undesirable adverse effect, namely the death of the patients.

The film criticizes the governments of wealthy countries for failing to identify or meet the real needs of the poor in the underdeveloped countries. It is an acid critic to the whole social and economic policy they follow in these countries. In areas where AIDS and tuberculosis are endemic diseases, the use in clinical testings of techniques that go against all ethical principles is usually accompanied by social injustices.

The core of this dense plot is similar to that of *The Fugitive* (1993) by Andrew Davis as both include bioethical aspects⁴.



Despite of all temptations that the pharmaceutical industry may offer to the physician, more markedly shown in the novel than in the film, the relationships between them both must be strongly based on ethics. It is up to the national and supranational drug agencies to drive the control and surveillance of all new drugs that are going to be marketed. The press sometimes shakes us with the disclosure of the abuses, wrongdoings and venality of the “pharma” industry. Although this kind of information is necessary, it does not create sufficient conditions for the *ethical health of the sanitary system*.

References

- 1.-Flórez J. Farmacología Humana. Barcelona: Masson; 2000.
- 2.-Rodríguez Artalejo F, Fernández-Crehuer Navajas J, Domínguez Rojas V. Aspectos éticos y legales de la investigación en Salud Pública. In: Piédrola Gil. Medicina Preventiva y Salud Pública. 10th. Barcelona: Masson; 2001. p 209-217.
- 3.-González Bueno A. Manual de Legislación Farmacéutica. Madrid: Síntesis; 2004.
- 4.- Lozano Sánchez FS, Areitio-Aurtena Bolumburu, A Ethics of clinical research and cinema. *The other Fugitive* (1993). J Med Mov [serial on the Internet]. 2006 [cited 2006 May 10]; 2: 44-50: [7 p.] Available from: http://www3.usal.es/~revistamedicinacine/Volumen_2_1/n2/ing_2_pdf/fugitivoing.pdf